## MEDICAL EVALUATION BOARD CHECKLIST

Refer to Chapter 3, PDES Manual, COMDTINST M1850.2 (series), for details.

## **Medical Evaluation Board Report should include the following:**

| 1. [] Cover Sheet (CG-5684).   |
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| Note: A Coast Guard physician, if one is available, shall prepare the cover sheet. If a DOD cover sheet has be prepared, it may also be included in the report package.  |
| 2. [] Typed Narrative Summary (SF-502).  |
| 3. [] Copies of all health record information pertaining to each diagnosed impairment, including SF-88 and SF-93 (current and enlistment or commissioning physical exams), consultations, reports of X-rays, photographs, and video tapes, when appropriate. All reports, including consultations, must be typewritten or printed legibly.         |
| 4. In mental health evaluations: <ul> <li>[] Use a military psychiatrist or the combination of a military psychologist and civilian psychiatrist for mental health evaluations regarding fitness for retention determinations by a Medical Evaluation Board.</li> </ul>  |
| 5. In cardiac cases:  [] EKG  [] American Heart Association Diagnostic Standards  [] METS test  [] Ejection fraction measurement   |
| 6. In impairment of hearing cases:  [ ] Audiometric Examination  [ ] Statement as to testing standard used (ASA, ISO, or ANSI), and  [ ] Voice discrimination test results: pure tone audiometry and speech discrimination without hearing aids.   |
| 7. In high blood pressure (hypertension) cases: [] Results of 3-day serial blood pressure check taken twice a day while on medication  |
| 8. In diabetes mellitus cases:  [ ] Type and frequency of medications administered and observed results.  [ ] Degree and frequency of any limitation of activities   |
| 9. In brain surgery cases: [] Size of hole in skull  |
| 10. In spinal impairment cases:  [ ] Range of motion (active) where indicated  [ ] Radicular symptoms, if indicated, objectively validated   |
| COMMAND ACTION   |
| 1. Advise member of all the following:  [] Significant findings, opinions, and recommendations  [] Opportunity to comment on report  [] Opportunity to submit a letter requesting retention  [] Requirement to sign CG-4920, DA Form 3947, or AF form 618 within 21 calendar days  [] Entitlement to pre-separation counseling IAW 10 U.S.C. §1142 |

## MEDICAL EVALUATION BOARD CHECKLIST (cont.)

| 2. [] Establish interim duty status for member.  |
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| 3. [ ] Send message reporting assigned status to CGPC-epm, opm, or servicing ISC (pf) if reservist.  |
| <ul> <li>4. For injury cases, provide one of the following: <ul> <li>[] Copy of the investigative report, or, preferably</li> <li>[] Copy of the Injury Report (CG-3822), or</li> <li>[] CO's statement setting time, place, and other circumstances surrounding the injury, accompanied by an opinion as to line of duty and misconduct</li> </ul> </li> </ul>  |
| Note: The member's current command is responsible for providing an opinion as to misconduct or line of duty, even if the injury occurred elsewhere.  |
| <ul> <li>5. Attach the following to the Board package (where applicable): <ul> <li>[] Member's comments regarding the board's report</li> <li>[] Member's request for retention with CO's endorsement</li> <li>[] If member is a reservist, a copy of the orders or other evidence that the impairment was incurred while entitled to receive basic pay</li> <li>[] If member is in receipt of normal service retirement orders, the member's election in accordance with Article 12.C.3. of Personnel Manual, COMDTINST Ml000.6 (series)</li> </ul> </li> </ul> |
| 6. [] Endorse board  |
| Note: If the board recommends "fit for retention" and the command concurs, the statement – "I concur with the board," will suffice. However, if the board recommends "not fit for retention," comply with article 3.1.7 of the Physical Disability Evaluation System, COMDTINST M1850.2 (series).  |
| 7. Distribute the board package as follows:  [ ] Original and two copies to CGPC-adm-l  [ ] Copy to the member  [ ] Copy retained by convening authority   |
| MEMBER ACTION  |
| 1. Required - complete one of the following: [] CG-4920, or [] Bottom portion of DA form 3947, or [] Bottom portion of AF form 618   |
| 2. Optional [] Comment, in writing, on board report [] Submit a letter requesting retention  |